1380682

FORM D

PROCESSED

THONSON ENANCIAL UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

(D check if this is an amendment and name has changed, and indicate change.)

	OMB APPROVAL		
	OMB Number: 3235-0076 Expires: APRIL 30, 2008		í
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ì	07048732		1
	DATE RECEIVED		i

Filing Under (Check t	pox(es) that apply):	☐ - Rule 504	□ Rule 50	5 <b>X</b>	Rule 506	ຸD Se	ction 4(0)	☐ ULOE	
Type of Filing: .	□ New Filing	· 🗵 A	mendment No.	1			/ ~	CD B.E.O.	
		A. BA	SIC IDENTIFICA	TION DAT	TA .		MAR	<b>ソ</b> つ	7
1. Enter the in	formation requested a	bout the issuer						2007	· /
Name of Issuer Attune Foods, Inc.	. (□ chec	k if this is an amen	dment and name	has chang	ged, and inc	icate chan	ge:)	108	,/
Address of Executive 535 Pacific Avenue	Óffices (Num e, 3rd Floor, San Fra	nber and Street, Cit Incisco, CA 9413		le) .		lephone N 15) 486-2	•	luding Area	Code)
Address of Principal (if different from Exec	Business Operations (lautive Offices)	Number and Street	, City, State, Zip	Code)	Te	lephone N	umber (Inc	luding Area	Code)
(if different from Execution Street Description of B	cutive Offices)		, City, State, Zip	Code)	Te	lephone N	umber (Inc	luding Area	Code)
(if different from Exec Brief Description of B Manufacturing and	utive Offices) usiness sales of healthy sn		, City, State, Zip	Code)	Тє	lephone N	umber (Inc	luding Area	Code)
(if different from Exec Brief Description of B Manufacturing and	utive Offices) usiness sales of healthy sn	ack foods.	, City, State, Zip	dy formed		·	umber (Inc		Code)
(if different from Execution of B Manufacturing and Type of Business Org corporation □ business true	utive Offices) usiness sales of healthy sn	ack foods.  □ limited p	artnership, alread artnership, to be Month	dy formed formed Year		□ other (p	lease spec	ify):	Code)
Gif different from Execution of B Manufacturing and Type of Business Org Corporation business true Actual or Estimated Execution D.	cutive Offices) usiness sales of healthy sn panization ust	limited pillimited pi	artnership, alread	dy formed formed Year 2006	IXI A	□ other (p		ify):	Code)

## **GENERAL INSTRUCTIONS**

Name of Offering

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address:

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1 of 6

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	A. BAŞIC IDENT	IFICATION DATA		-
Enter the information requested for the     Each promoter of the issuer, if the     Each beneficial owner having the pof the issuer;	issuer has been organized wi		f, 10% or more of a	class of equity securities
<ul> <li>Each executive officer and director</li> <li>Each general and managing partner</li> </ul>	-	corporate general and manag	ing partners of part	nership issuers; and
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) <b>Hurlbut, Robert</b>				
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci	p Code) sco, CA 94133	•	
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Kiley, Thomas D.				
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci		·	·
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	.   Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Nykin, Ilya B.			•	
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci			* Villagements - de la Village
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner.	.   Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Rosenzweig, William B.				
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Wyse, Roger E.				Vegetalista de D.
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zinue, 3rd Floor, San Franci		-	
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Weed, David				
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Reismeier, Joerg				
Business or Residence Address (Num c/o Attune Foods, Inc., 535 Pacific Ave	ber and Street, City, State, Zi nue, 3rd Floor, San Franci			

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ General and/or Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner □ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Brand New Brands, Inc. **Business or Residence Address** (Number and Street, City, State, Zip Code) 100 Shoreline Highway, 535 Pacific Avenue, 3rd Floor, San Francisco, CA 94133 □ Director □ General and/or Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner □ Executive Officer Managing Partner Full Name (Last name first, if individual) Burrill Nutraceuticals Capital Fund, L.P., and affiliated funds Business or Residence Address (Number and Street, City, State, Zip Code) One Embarcadero Center, Suite 2700, San Francisco, CA 94111 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Prolog Capital II, L.P. **Business or Residence Address** (Number and Street, City, State, Zip Code) 7733 Forsyth Boulevard, Suite 1440, St. Louis MO 63105 Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) □ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Director □ Beneficial Owner □ Executive Officer □ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	Ur	PROCEEDS	•	K.
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate the columns below the amounts of the securities offered for exchange and already exchanged.	·		. 4	
	Type of Security		Aggregate Iffering Price	AI	nount Already Sold
•	Debt	\$_	-0-	\$_	-0-
	Equity:	\$ <u>6,</u>	034,036.16*	\$ <u>1</u>	949,999.16*
	□ Common				
p S Is	depresents new offering and sale. Does not include the conversion of promissory notes with rincipal and accrued interest valued at an aggregate 3,499,963.84, into Series B Preferred stock. Said promissory notes and the conversion of same were covered by a Notice of summance of Securities on Form D filed with the SEC on October 30, 2006, as amended anuary 24, 2007.			•	
	Convertible Securities (including warrants)	\$_	-0-	\$_	-0-
	Partnership Interests	\$_	-0-	\$_	-0-
	Other (Specify:)	\$_	-0-	\$_	-0-
-	Total	<b>\$</b> 6,	034,036.16*	<b>\$</b> 1	949,999.16*
	Answer also in Appendix, Column 4, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate follar Amount of Purchases
	Accredited Investors		.3	• \$ <u>1</u>	949,999.16
	Non-accredited Investors		-0-	\$_	N/A
	Total (for filings under Rule 504 only)		N/A	\$_	
	Answer also in Appendix, Column 3, if filing under ULOE.				
3.	· · · · · · · · · · · · · · · · · · ·				
	Type of offering		Type of	C	ollar Amount
	D 4 606		Security	_	, Sold
	Rule 505			\$_	
	Regulation A			\$_	<del> </del>
•	Rule 504	-		\$_	
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$_	
	Printing and Engraving Costs		<u> </u>	\$_	
	Legal Fees		<b>IX</b> .	\$_	60,000.00
	Accounting Fees			\$_	
	Engineering Fees			\$	
•	Sales Commissions (specify finders' fees separately)			\$	-
	Other Expenses (identify)			\$	
	Total		Œ	\$ -	60,000.00
			<del>-</del>	- ₹ _	2-1444.AA

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	b. Enter the difference between the aggregate offering price given in response to Pa 1 and total expenses furnished in response to Part C - Question 4.a. This difference gross proceeds to the issuer."	is the "a	adjusted	,	\$ <u>5,974,036.16</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proportion each of the purposes below. If the amount for any purpose is not known, furnish a check the box to the left of the estimate. The total of the payments listed must equal gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	an estim	nate and	•	·.
		`	Payments to Officers, Directors, & Affiliates	-	Payments to Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		· \$	· 🗖	\$
	Construction or leasing of plant buildings and facilities	· 🗖	\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another				
	issuer pursuant to a merger)		\$		\$
	Repayment of indebtedness		\$	ൎ	\$
ĺ	Working capital		\$	X	\$ <u>5,974,036.16</u>
	Other (specify):		\$		\$
	Column Totals		\$ <u>-0-</u>	. <b>X</b>	\$ <u>5,974,036.16</u>
	Total Payments Listed (column totals added)		\$ 5,9	974,03	36.16

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Attune Foods, Inc.

Name (Print or Type)

Robert Hurlbut

Signature

March 23, 2007

Title of Signer (Print or Type)

President and Chief Executive Officer

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)